



TEMPORARY DELEGATION OF PARENTAL POWERS

This form is used by Kearney Public Schools as evidence that each student attending KPS is living with a resident Kearney person who has been appointed by the custodial parent to act 'in place of the parent' in matters regarding the care, custody, and property of the named student. The appointment is active for one year from the date the student begins school.

I, _____ of _____, Nebraska, do
(your full name) (city where you reside)

make and appoint _____ of _____
(full name of person being appointed) (address, city and state where person being appointed resides)

to act for me and in my name to exercise all my powers regarding the care, custody and property

of _____, born _____, except my power to consent to marriage and
(child's full name) (child's date of birth)

adoption of the child. I hereby give _____ full authority and power to do
(full name of person being appointed)

everything necessary to be done, as fully as I could or might do if personally present, for a period

not exceeding six months beyond this date. I confirm and ratify all lawful acts done, or caused to be

done by _____ acting under this Delegation of Powers
(full name of person being appointed)

regarding the care, custody and property of my child. This Delegation of Parental Powers may be

revoked by me at any time before the expiration of this one year period by written notice to

_____ at the address above.
(full name of person being appointed)

WITNESS my hand this _____ day of _____, 20____.

(your signature)

ACKNOWLEDGED before me this _____ day of _____, 20____.

(Notary Public)